

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

RAND PAUL FOR US SENATE

Full Name (Last, First, Middle Initial)

A.**WILLIS, ROY, , ,**

Mailing Address 8917 CREST WOOD DR

City

FORT WORTH

State

TX

Zip Code

76179-4073

FEC ID number of contributing
federal political committee.**C**

Name of Employer

AMERICAN ONE SOURCE

Occupation

TRUCKING

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	2	1

Transaction ID : SA11A.938855

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION
EARMARKED FROM SENATE CONSERVATIVES
FUND**B.**

Full Name (Last, First, Middle Initial)

WISE, ROBERT, H., MR., JR.

Mailing Address 2348 RIVER GRAND DRIVE

City

BIRMINGHAM

State

AL

Zip Code

35243-2324

FEC ID number of contributing
federal political committee.**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	2	1

Transaction ID : SA11A.939000

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CONTRIBUTION
EARMARKED FROM SENATE CONSERVATIVES
FUND**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.**C**

C00694323

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

802085.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	1

Transaction ID : SA11C.858929

Amount of Each Receipt this Period

194.50

☒ Memo Item
 CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ▶

700.00

TOTAL This Period (last page this line number only)..... ▶